2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740403

FILED Mar 04, 2008 Secretary of State

Entity Name: CHATEAU LA MER CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4400 HIGHWAY 20 E 4400 HIGHWAY 20 E

SUITE 313 SUITE 312

NICEVILLE, FL 32578 US NICEVILLE, FL 32578 US

Current Mailing Address:

New Mailing Address:

LANDSBERGER, DARLANE

PO BOX 5263

NICEVILLE, FL 32578 US

FEI Number: 59-1906749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANDSBERGER, DARLANE 4400 HIGHWAY 20 EAST SUITE 313

4400 HIGHWAY 20 EAST SUITE 312 NICEVILLE, FL 32578 US NICEVILLE, FL 32578 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 03/04/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BENTON, CAROL MORROW, JOHN Name: Name: 555 BREWER CIRCLE Address: 11 TIMOTHY TRACE Address: City-St-Zip: GRANT, AL 35747 City-St-Zip: ANNISTON, AL 36207

Title: () Delete Title: (X) Change () Addition SHORTER, BARBARA Name: SHORTER, BARBARA Name:

Address: 1027 WILLOW PARK DR Address: 1027 WILLOW PARK DR City-St-Zip: HUNTSVILLE, AL 35803 City-St-Zip: HUNTSVILLE, AL 35803

Title: () Delete Title: SD (X) Change () Addition

MORROW, JOHN WILCOX, BARBARA Name: Name: 11 TIMOTHY TRACE 523 OAK ALLEY DR Address: Address: City-St-Zip: ANNISTON, AL 36207 City-St-Zip: PEARL RIVER, LA 70452

Title: SD () Delete Title: TD (X) Change () Addition

BROWNLEE, MICHAEL Name: CIRCEO-LOUDON, RENATA Name: Address:

1118 WESTBROOKE WAY 104 WYNN PL Address:

City-St-Zip: ATLANTA, GA 30319 City-St-Zip: WARNER ROBBINS, GA 31088

Title: () Delete Title: () Change (X) Addition

MCCORMICK, VERONICA Name: Name:

89 N LAKE DRIVE Address: Address:

City-St-Zip: City-St-Zip: CAPE GIRARDEAU, MO 63701

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN MORROW PD 03/04/2008

Electronic Signature of Signing Officer or Director

Date